MULTIPLE DEPENDENT CLAIM SERIAL NO. JOSUP SERIAL NO. APPLICANT(S) FILING DATE FEE CALCULATION SHEET • (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AS FILED AFTER AFTER AFTER AS FILED I" AMENDMENT 2 AMENDMENT I" AMENDMENT 2 MAMENDIMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP: IND. DEP. IND. DEP. <u>59</u> 12. 13 . 14 . 15 · 17 · 18 · 19 · 20 · 22 79 89 101AL TOTAL DOD. IND. MATAL DEP. DEP. TOTAL TOTAL

PTO - 1360 (REV. 11/0A)